PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

U.S. Patent and Tradems Chice; U.S. Debart Action of information unless it illentions a cold of the Paparounds Reduction Act of 1005, no access are required to respend to a collection of information unless it illentions a citied for the paparounds.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/563,017		Filing Date 05/24/2006		To be Mailed	
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
FOR			NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b),		N/A		N/A		N/A	1 == (4)	١	N/A	1 = (4)	
	SEARCH FEE (37 CFR 1.16(k), (i), (i)		N/A		N/A		N/A		١	N/A		
	EXAMINATION FE (37 CFR 1.16(a), (p),	E	N/A		N/A		N/A		1	N/A		
	TAL CLAIMS CFR 1.16(i))		minus 20 = *				x \$ =		OR	x s =		
IND	EPENDENT CLAIM CFR 1.16(h))	s	minus 3 = *			ı	x \$ =		1	x \$ =		
	APPLICATION SIZE (37 CFR 1.16(s))	FEE sheet is \$2 addi	ets of pape 250 (\$125 tional 50 s	gs exceed 100 in size fee due for each in thereof. See CFR 1.16(s).								
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))									ı			
* If the difference in column 1 is less than zero, enter "0" in column 2.							TOTAL		ı	TOTAL		
APPLICATION AS AMENDED – PART II         OTHER TH           (Column 1)         (Column 2)         (Column 3)         SMALL ENTITY         OR         SMALL E										ER THAN ALL ENTITY		
AMENDMENT	06/18/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.18())	• 12	Minus	<del></del> 20	= 0		x \$ =		OR	X \$52=	0	
	Independent (37 CFR 1.16(h))	• 2	Minus	<b></b> 3	= 0		x \$ =		OR	X \$220=	0	
	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0	
		(Column 1)		(Column 2)	(Column 3)							
AMENDMENT		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1,16(i))		Minus	**		l	x \$ =		OR	x \$ =		
M	Independent (37 CFR 1.16(h))		Minus	***	=		x \$ =		OR	x \$ =		
핍	Application Size Fee (37 CFR 1.16(s))											
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Municher Proviously Paid For IN THIS SPACE is less than 30, enter "2".  If the "Highest Number Proviously Paid For IN THIS SPACE is less than 3, enter "2".  MARY PEOPLES!												

his collection of information is equated by 37 CFR. 116. The information is required to obtain or retain a based by the public within it to life (and by the USTTO to process) an application. Confidentiality is governed by 30 US of 22 and 37 CFR. 114. This collection is estimated to the bit 2 minutes to complete a position form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or seggestions for reducing this burdon, about the sent to the CERT (information Officer. U.S. Patient and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandris, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandris, VA 2213-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450, Alexandris, VA 22313-1450.